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The importance of strengthening relationality: Experiences of women living with visible, physical disabilities in rural Papua New Guinea

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This article reports on research that explored the views and experiences of daily life for five women living with visible, physical disabilities in a rural setting in Papua New Guinea. The findings show that women with disabilities experience discrimination not only because of their disability and gender-, but also because of the attitudes, assumptions, and beliefs about disability and gender which generate discriminatory practices and social structures, which together worked to silence women with disabilities. This contributes to the work around disabilities and relationality in the Pacific. It puts forward an argument for a focus on building relationships and making connections to enhance understanding and reduce marginalization of women with disabilities. This opposes the traditional approach which has focussed on addressing the material and /physical needs that result from the disability itself. A focus on relationality is argued to encourage inclusion and social participation for women with disabilities at their local communities.

Key words: Women with disabilities; views and experiences; Papua New Guinea; Pacific; relationality; foster participation.

DEDICATION

In loving memory of my mother, who left too early to see the completion of my academic journey, Helen Kukie Pangura Yenas. Born 17 October 1958. Passed away 2 November 2017.

INTRODUCTION

There is limited research on women and girls with disabilities in the Pacific region (Spratt, 2013; Stubbs & Tawake, 2009; Thomas & Legge, 2009). As a result, very little is publicly documented about their lives and-, their situations, and the issues that impact on their rights as women and as women with disabilities (Groce, 1997; Sands, 2005). Spratt (2013) examined the situation and needs of women with disabilities in three Pacific Island Countries (PICs): Kiribati, Solomon Islands and Tonga. She conducted situational analysis interviews with women with disabilities with a focus on their sexual and reproductive health. Her study indicated that Pacific women with disabilities experience more violence than Pacific women without disabilities. The author also acknowledges the "lack of published evidence" (Spratt, 2013, p. 29) on the situation and needs of disabled women in the PICs. Stubbs and Tawake (2009) conducted a survey across various PICs,- including Papua New Guinea (PNG), which focussed on issues and challenges faced by women with disabilities in the Pacific with the goal of examining "social and economic factors impacting on their human rights" (p. 7). Their findings also revealed that women with

disabilities in the Pacific experience physical and sexual abuse and discrimination, as well as discrimination in many other aspects of life, including social participation in their communities.

Although research shows that the majority of women with disabilities live in what is called "the developing world", a report by the World Bank (2009) notes:

> Many women with disabilities report feeling "invisible" in the development context and largely absent from the development agenda. Even when gender considerations are incorporated into development projects, the specific perspectives and needs of women and girls with disabilities are seldom sought or incorporated. (para. 1)

This issue has been noted by several academics and organizations in other studies conducted on women with disabilities (Boylan, 1991; Groce, 1999; Sands, 2005; Yeo, 2005). *The UN Convention on the Rights of Persons with Disabilities* enshrines equality, empowerment, and recognition as universal rights for women (United Nations, n.d.). However, in terms of development initiatives, including research, women with disabilities are "not recognized as a priority" (Sands, 2005, p. 52), - rather they are recognized for their neglected rights. In cases where they are identified, the focus is on "rehabilitation, impairment, prevention, healthcare and the provision of technical aids and equipment" (Sands, 2005, p. 52). The views and experiences of the daily life of women, beyond their disability, are neglected in both research and development initiatives. This indicates the need to conduct research on various aspects of the lives of women with disabilities, including their views, lived experiences, their relationships and the connections these women have within their communities.

The lack of research on women with disabilities in Pacific countries extends to PNG where, women with disabilities have an extremely low status. They are disempowered, disrespected and their voices can go unheard, unrecorded, and their needs unmet (National Disability Resources and Advocacy Centre, [NDRAC], n.d). In this article, I aim to explore this situation and address the concerns of women with disabilities in a rural setting within PNG. I also aim to suggest ways to raise awareness of the needs of women with disabilities by outlining the importance of establishing and strengthening relationships and connections in a relational space, such as the local community, that can foster social participation and inclusion.

I begin by briefly discussing the current situation for women with disabilities in rural communities in PNG. I then provide an overview of the concerns in their daily life before presenting an argument for the importance and value of relationality in raising awareness of these concerns. I conclude by arguing that it is important to maintain the value of kinship and bonding at the community level by strengthening relationality. I suggest that this can be achieved: -through the development of relationships at the community level in rural PNG communities. The development of such relationships creates better opportunities for women who live with disability to be respected for who they are and have their contributions in their community recognized.

INTRODUCING THE CONTEXT: PAPUA NEW GUINEA

PNG is the largest island country in the Pacific region. It shares borders with Indonesia, Solomon Islands and Australia. It gained independence from Australia in 1975 (Geissinger, 1997). About 85% of the population live in remote and rural communities (Hanson, Allen, Bourke, & Mc

Carthy, 2011). PNG is a developing nation in the Pacific and is also an aid donor in the region (Aisi, 2014).

As a culturally diverse nation, PNG has more than 800 different languages and two national languages, Pidgin *(Tok Pisin)* and Motu (Winis, 2013). The main languages that are used as a medium for business communication are English and Pidgin. The country is situated in the tropics and has rugged mountains, swamps, lakes, rivers and seas. Communities are geographically isolated, and this complicates service delivery to many rural communities (Bomen, 2017). Culture has a predominant influence on day-to-day practices of the rural PNG population, and on people's views, assumptions and attitudes (Mapsea, 2006).

ATTITUDES TOWARDS GENDER AND DISABILITY

People's attitudes and the physical and socio-political structures that make up PNG society are some of the factors contributing to the discrimination, marginalization, and stigmatisation (NDRAC, n.d.). Negative attitudes are often more debilitating for women with disabilities than the disability itself (Boylan, 1991). As a result of negative attitudes, a disabled woman'—s health, her wellbeing and social life can be affected, thus limiting her opportunities for equal participation and inclusion in the community (NDRAC, n.d.). Women with disabilities in PNG are more likely to benefit when they are given space to voice their life experiences and concerns (Yenas, 2019). If their voices are heard, their concerns can be addressed. To encourage and empower women to speak about their concerns, connections and relationships at the community must be encouraged and strengthened (Fa' avae, 2018). For this reason, it is important to build and maintain connections at the local community level.

Of the many values held by people in Pacific societies, is the sense of connectedness, the bonding of kinship and the relationships that people have with one another, within their families, their clans and communities; and with their land, sea, mountains and rivers (Pacific Islands Forum Secretariat [PIFS], 2013; Fa' avae, 2018). Although, the sense of connectedness in the Pacific is strong, women in countries such as PNG, who come from patriarchal societies are recognized as second-class citizens (Vali, 2010, Yawi, 2012). They do not have the same value as men and, are required to be submissive to men, and become homemakers (Vali, 2010; Yawi, 2012). Being a homemaker is not necessarily inferior or a bad thing, but if women are only allowed to be homemakers and not afforded opportunities to do other things, then that is inequitable. Women, who are disabled, have an inferior status, are discriminated against, are stigmatized and marginalized, because of both their gender and disability (Spratt, 2013; Stubbs & Tawake, 2009; United Nations Enable, n.d.).

Socio-cultural beliefs and practices in PNG have a strong influence on how able-bodied people perceive disability and disabled people (including women) (Byford & Veenstra, 2004; Mapsea, 2006). These beliefs, practices, and the physical environment also substantially influence the disabled women's level of involvement in their communities (Yenas, 2019). This also influences the relationships and connections they have in their communities or local spaces, thus affecting their involvement at the community level because their contributions in the community are not recognized or acknowledged (Spratt, 2013).

METHODOLOGY

This study is set within the field of disability studies and was designed to explore the realities of daily life for women living with visible, physical disabilities. A qualitative research design sets the foundation for this research (Punch, 2005; Smith, 1999; Smith & Osborn, 2004). Interpretative Phenomenological Analysis (IPA) was used in this study and is an approach used in qualitative research that is committed to exploring and understanding lived experiences of a particular phenomenon (Smith, Larkin & Flowers , 2009). IPA is an "examination of how people make sense of their major life experiences" (Smith et al., 2009, p. 1). Each of the interview participants have their own individual experiences of their social and personal worlds (Grey & Smith, 2004; Smith et al., 2009) IPA, as a methodology and framework, was considered suitable for the study, because it facilitated a way to explore and understand a life-world phenomenon—in this case, the views and experiences of women living with visible physical disability in rural areas in PNG.

PARTICIPANT INFORMATION

At the core of this study are five semi-structured interviews conducted with five PNG women aged between 16 and 35 years who have visible, physical disabilities. The interviews used were exploratory and facilitated the collection of accounts about the views and experiences that the women themselves chose to talk about. The participants in this research came from a rural setting, in one of the provinces identified as 'least developed' in PNG. Service delivery is of a very low standard, life is complicated, and people work very hard to daily survive.

As a PNG woman from a patriarchal society, the approach I took in this research has been guided by the socio-cultural beliefs and practices which frames my identity as an individual (Fa avae, 2018). In this research, I took both an insider and an outsider perspective (Sultana, 2007). I was an insider because I speak the same language as the participants (*Tok Pisin*) and we all come from rural PNG and share cultural commonalities. Although I share much in common with my participants, I also took an outsider perspective as a non-disabled woman, - researching the lives of disabled women.

This study complied with Ethical Conduct in Human Research and Related Activities and Regulations at the University of Waikato (2008). I had to protect the anonymity of my participants and make sure my research maintained a high level of confidentiality. I encountered some culturally sensitive issues that could have influenced what the participants shared with me, such as participants not sharing their experiences of ill-treatment, and the hurt and the pain they experienced in life to protect the good name of their family, clan or the community to which they belong.

The participants were women with physical disabilities which, at times, made it difficult to access the research site. For example, there were times we agreed to meet at a certain time and venue, but they did not turn up. I was flexible and worked according to their timing and convenience.

The geography of the research location, it's remoteness and poor communication system were some challenges I encountered. Direct access to the research participants from my location in New Zealand (during my time of study) was not convenient, so I enlisted the assistance of a contact person, who formally agreed to act as liaison between the participants and myself. The contact person had access to the women participants because she has an existing data base of

people with disabilities in the wider area. This made it convenient for the initial selection of the participants.

Upon my arrival at the research location, I met each woman, spoke to them, explained what my research was about, and asked if they wanted to participate. Each woman gave consent to participate in the research. Pseudonyms are used to protect the identity of the participants.

INTERVIEW PROCESS

During the interview, each woman and I sat on either side of a mat that was spread on the floor of a *haus win* (rest house) or on a seat in a rest house. The seating position did not establish any power difference. In this way, trust and rapport was established with the participants so that a safe space was created. *Tok Pisin* was used as a medium of communication between the participants and me. An idiographic focus was adopted throughout the research to complement the qualitative research design (Charlick, Pincombe, McKeller, & Fielder, 2016; Smith et., 2009).

I transcribed the five interviews verbatim in PNG *Tok Pisin* and then translated them into English. First, I read and re-read the transcript several times to capture the essence of the participant. Second, I noted and highlighted important points from the texts. I then used the English scripts to develop participants' narratives as single cases. I started the process with the transcript of the first participant and followed the same process for the other four participants. Rich complex narratives were uncovered during the process of developing participants' life stories/ narratives (Gibson, 2012; Hamilton & Atkinson, 2009). My reflections were later placed at the end of the narratives (Gee, 2016). The narrative development included a brief background of each participant, their personal story, which included the participants own voice (direct quotes) on their views and experiences of daily life, and my reflection at the end of each narrative.

FINDINGS

As part of a larger study, four salient superordinate themes (see Table 1), also understood as major domains or main themes, emerged from the women's narratives (Walsh-Gallagher, Sinclair, & Mc Conkey, 2012). Each theme area was considered in relation to the individual's views and experiences.

Superordinate Themes
Perceptions of self, related to disability
Positive Perceptions/Affirmation
Marginalization
Violence

Table 1: Superordinate themes (major domains) Adapted from Yenas (2019, p. 89)

Table 2 links the superordinate themes to constituent themes that emerged from the narratives. As the focus of this article is on the experiences of women through a relational lens, this section

examines the superordinate themes of *Perceptions of self, related to disability* and Positive Perceptions/affirmation.

The *views and experiences* of daily life for women living with visible, physical disabilities.		
Perceptions of self, related to the disability	Self-identity Negative self-perception Responding to lack of acceptance	Identity Negative-perceptions
Positive Perceptions/ Affirmation	Affirmation at home Participants find acceptance Affirmation in community Affirmation about being disabled Hopes and aspirations Resilience	Affirmation Acceptance
Marginalization	Stigma and Discrimination Lack of opportunity	Discriminated against Exclusion
Violence	Abuse	Verbal Physical Emotional

Table 2: Superordinate themes (major domains) and constituent themes (Adapted from Yenas, 2019, p. 89)

SUPERORDINATE THEME ONE:
PERCEPTIONS OF SELF, RELATED TO THEIR DISABILITY

Constituent Theme 1: Self-identity

Four of the participants identified themselves as *women living with disability* and indicated that they were more or less comfortable being seen this way.

> God made me disabled (Angie)
>
> I view myself, as a person living with a disability (Rebecca)
>
> My name is Gee. I am a disabled woman (Gee)
>
> I live as a disabled woman - I accept it (Amber)

Essie however did not see herself as a woman with a disability. This could be because of her cognitive disability, as she seemed much younger in her outlook than the others.

Constituent Theme 2: Negative self-perceptions

While participants accepted *disabled* as a description of themselves, they were not always happy about how they were viewed by others in relation to the term.

> I see others stare at me and make me feel I have a disability – I feel different (Rebecca)

Being seen as different could result in feelings of discomfort.

> Having a woman with disability like me brings shame - they do not want me to live with them - I felt so bad because they are not the same as me; I am different from them (Angie)
>
> I am different to my sisters (Gee)

Putting up with these feelings and accepting that their difference caused comments of discomfort was a strategy used by the women to cope.

> I do not bother telling them to stop … I feel that, it is not ok. [But] I do not tell anyone [about how I feel]. I just listen … (Amber)

The effects of being seen as *other/disabled/different* in relation to non-disabled people affected how the women were treated at home.

> In the family home, they mistreat me (Gee)
>
> My brother in-law built my house separately from his family because his wife does not accept me (Angie)

Support from other family members was not always there.

> Last year, we [Sophie, my younger sister and I] had a very big argument and I left the house to live with Betty [a close friend] (Gee).

Ill-treatment for looking different could also be found in the local community.

> They call me S - they say I am a snail that crawls (Angie)

Constituent Theme 3: Responding to lack of acceptance

Sometimes the women were able to answer the taunts they received.

> Sometimes I get angry and ask them, "how do you feel when you call me such names, do you feel good?" They will just laugh (Rebecca)
>
> When I want to rebuke them, they say, "you don't have a full arm, you hand is short, that's why we call you that" (Amber)

But it wasn't easy knowing what the response was likely to be. Remaining silent was also a way to get through unpleasant incidents.

> When it becomes too difficult to bear, I will just sit [and not say anything] (Gee)

The women were often left emotionally distressed when such incidents happened and in some instances this (triggered a dangerous mental state).

> This makes me feel so sad at heart and makes me think of committing suicide, but I keep it all to myself and move around with a heavy heart (Angie).

The findings from this research suggest that participants identified themselves as disabled and they had self-perceptions that were mostly negative. They seemed vulnerable due to high levels of self-doubts and how they responded to lack of acceptance from others. Their sense of self was

strongly influenced by other people's views and assumptions about disability and disabled people. Their narratives indicate that beliefs and perceptions impact the way that people behave towards them. As previous research also suggests, these beliefs and perceptions are influenced by socio-cultural practices in PNG society and have a significant influence on the widely held beliefs, perceptions, and assumptions towards disability and disabled people (Byford & Veenstra, 2004; Kuzma, Ramalingam & Karthikeyan, 2016; Mapsea, 2006). These are evident in the day-to-day experiences of the participants in this study. These perceptions continue to disadvantage them in their communities. In response to a lack of acceptance in the wider community, participants seem to have accepted that they are different. Being different and being seen as different developed a new, negative identity for these women, a finding that is supported by Hans and Patri's (2003), research. How being seen as different might become an asset rather than a liability for disabled women in PNG is a question for further research

SUPERORDINATE THEME TWO: POSITIVE PERCEPTIONS: AFFIRMATION

Constituent Theme 1: Affirmation at home

As the participants' narratives reveal, many talked about what they do at home. All spoke positively about completing daily activities and their competence in achieving the set tasks.

> I do my own cooking; I scrape the coconut [dried] and [extract coconut] milk [from its flesh] and prepare greens [independently] … I do my own laundry …[I] chop fire wood … I clean around the house … I conduct these [daily chores/activities, all] by myself (Angie)

> I walk independently … I do the dishes and I do my own laundry (Essie)

> I fetch water from a tank, which is close by (Rebecca)

> I hold the axe in one hand [left hand], and lift it to break firewood, scrape coconuts (Amber)

All participants contributed to the running of the house and they highlighted that these tasks were achieved independently of support from others. All took pride in these achievements and the contribution they made to their daily existence.

> I am a hard-working woman … I do most things independently (Gee)

> I do these things to sustain my living … (Angie)

However, at times the lack of support from others for the more difficult tasks was felt.

> I do everything by myself … It is difficult (Amber)

Constituent Theme 2: Participants find acceptance

In general, participants have found acceptance in certain groups in the community. While Angie spoke of difficulties related to living with her family, others talked about being accepted by family members without reservation.

> I move around with them [family]. I like all of them (Essie)

> I live with my mother and grandmother. I feel happy … we live together (Rebecca)

> I have a good relationship with my family members. My family accepts me. My in-laws come and help … (Amber)

When living with family became tense, Gee was able to go to stay with a (non-disabled) friend who lived close by. This relationship, with a person Gee considered as *a family member*, was very affirming for her.

> To find peace, I usually walk to Betty's [a close friend] place — that is when I am most happy. I stay with her for as long as I want before returning (Gee)

Participants are most happy when they leave the home environment because that is when they feel happy and are not bothered about what happens at home.

> When I leave home and go out … ooooh, … I forget about everything that happens in the family home (Gee)

> When I leave home, come out and meet other people … I feel happy. Like sitting with you now and talking, I am happy, and I appreciate this because it helps gives me space to think positively (Angie).

Constituent Theme 3: Affirmation in community

All the women participated in a number of positive and fulfilling activities in their local communities. For example, selling products at the market; such an activity allowed the women to maintain at least some independence from family, as these statements reveal.

> I sell things at the market … betel nuts and mustard (Amber)

> I make bilums [string bags] (Angie)

For Essie, affirming experiences included being able to move freely within the community. She took great pride in this achievement in particular.

> I can get on the bus (Essie)

Other highly valued activities for the women included attending church.

> I am a female youth of St Philomena group … that is the only group I am in the community (Gee)

Rebecca was the only participant who had the opportunity to complete primary school education. She spoke positively about this opportunity. Her comment reflects the love, care, and support her family provided to enable her to complete her primary school education.

> I attended Mango Primary School; I completed Grade 8 (Rebecca).

The participants' narratives also revealed that participants have positive perceptions about themselves, both as women and as people with disabilities. They are self-motivated as much as possible; they live independent lives and are able to sustain themselves. In addition, two participants communicated messages of affirmation as disabled women. All the participants spoke positively about completing daily activities and their competence in achieving their set tasks. The finding that participants were independent in performing the daily activities at home engendered feelings of confidence and self-appreciation of completing daily tasks with independence and competence. In PNG, women are viewed as key producers in their families, thus, these examples, and the narratives are not uncommon in PNG where life for women in rural remote communities is difficult and challenging (Hinton & Earnest, 2009; Mikhailovich, Pamphilon, Chambers, Simeon, & Zapata, 2016). This finding is supported by existing literature on women with disabilities which indicates that regardless of their limitations, women with disabilities adopt positive measures in their own ways and make significant contributions in their communities (Boylan, 1991; Nosek, Robinson-Whelen, Hughes, & Mackie, n.d.; Spratt, 2013). However, as Spratt (2013) also shows, their contributions are not always acknowledged or recognized.

DISCUSSION

The women's narratives reveal a complex picture of the lives of women with disabilities in PNG. The narratives gathered are empowering despite the difficult challenges the women encounter in their communities. The stories reveal the values of courage, strength, and determination. Their situations compared to able-bodied women are severe and complicated, yet their stories revealed hope, determination and resilience. Both able and disabled women develop resilience and self-reliance. This helps them provide for themselves and their families (Hinton & Earnest, 2009, 2010). While this is the case for all women, women with disabilities can find it hard to adhere to the day-to-day lifestyle and situations because of the already difficult, challenging and complex situations in their communities.

From this study, it can be argued that women with disabilities in PNG are marginalized in different areas of their lives. The experience of being marginalized is evident in the participants' narratives because they are viewed as *other/disabled/different* compared to non-disabled people, as the word *different* seemed to have appeared in all the stories except, Essie's. It is clearly evident in the narratives that the participants experience stigma and discrimination. Throughout the interviews, participants spoke about the type of treatment they received from family and members of the wider community which made them feel different. The feeling of being stigmatized and discriminated against generates low self-esteem, doubt, and a lack of acceptance. This has caused the participants to not recognize their value as women, as people and as members of the community. Literature on women with disabilities confirms these accounts (Stubbs & Tawake, 2009). Indeed, when further compounded with factors such as socio-cultural beliefs and practices, about gender and disability, women with disabilities experience multiple forms of discrimination (Stubbs & Tawake, 2009; United Nations Enable, n.d.)

Also, the way they are treated has a negative impact on their daily experiences. People's perceptions, actions and attitude towards them have affected them in many ways. Several other studies also confirm that women with disabilities are marginalized in society (Barranti & Yuen, 2008; Sands, 2005; Spratt, 2013). Existing literature also suggests that women with disabilities in countries identified as "developing" are one of the most marginalized groups (Boylan, 1991; RI/ Global Work Women and Disability [RI/GWWD], n.d.; United Nations Enable, n.d.). Local beliefs, norms, and understandings, have a great impact on how able-bodied people perceive, treat, and react towards people with disabilities (Kuzma et al., 2016; Mapsea, 2006). As this study shows, all the women reported experiencing verbal humiliation through name-calling and labels describing how they moved around.

I found that these five women with disabilities in rural communities in PNG were bound up in a complexity of experiences. Socio-cultural beliefs and perceptions strongly constitute the attitudes that abled- bodied people have towards them (Mapsea, 2006). Although, the value of women is gradually becoming more recognized and respected in PNG society today, the perception that society holds towards women as subordinates or inferior to men still prevails (McNae & Vali, 2015; Vali, 2010; Yawi, 2012).

The women's narratives also reveal that they are socially excluded in various aspects of life. It is clear that "social exclusion is a complex concept that encompasses a variety of interconnected process and problems" (Hutchison, Abrams, & Chritian, 2007, p. 30). Yet, all the participants experience exclusion in slightly different ways. The narratives revealed that it is important to maintain the value of kinship and bonding at the community level as well as the need to

strengthen relationality (PIFS, 2013). In this way a sense of connectedness, and the bonding of kinship that people in Pacific societies have (PIFS, 2013) could create a relational space to support women- who live with disability to be respected for who they are; and their contributions recognized. This will also strengthen the relationships that women with disabilities have with their families, clans, and in their communities (Fa'avae, 2018). This view is supported by Paulson (2018) who argues that despite differences, Pacific Islanders have commonalities: including "their beliefs in principles of obligation, reciprocity, greater good, and strong family; and community ties and Christianity and spiritual connections to ancestors, the land and the ocean" (Paulsen, 2018, p. 40). The relationships and the sense of connectedness in the local community space can also help to dismantle attitudinal barriers and perceptions that people have towards women and disability in the local community spaces.

The findings of this study have indicated the need to conduct further research towards improving the situation for women with disabilities in rural community spaces by ensuring that they participate in activities that help strengthen the connections at relational spaces such as within the community. Further research needs to be conducted with men and children living with disabilities to help them understand the value of relationships and connections within their communities. Research is also needed to explore the views of able-bodied people about their practices towards people with disabilities in their communities. This could strengthen our understanding of the value of being engaged in relational spaces.

CONCLUSION

Women with disabilities "are often perceived as weak and dependent" (Morris, 1993, as cited in McDonald, Keys, & Balcazar, 2007, p. 147), a position that can impact on how they feel about themselves, their identity, and their value in their community. As this study has shown the way women with disabilities feel about themselves is strongly determined by other people's attitudes, actions and behaviour towards them (as discussed earlier).

This research has explored the meanings of the lived experiences of daily life for the participants that emerged from the narratives about their individual experiences. In accordance with the principles and guidelines of the IPA approach, this research has provided authentic information and insights into the views and lived experiences of five women with disabilities in rural communities in PNG. It has also shown how the socio-cultural context strongly influences the quality of life for women with disabilities and affects how these women experience their physical disability and day- to-day functions. This article therefore argues that it is important to engage women with disabilities in a relational space, such as the community, in order to strengthen the relationships and connections that are established as the community.

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AUTHOR'S BIOGRAPHY

The author was awarded a New Zealand scholarship to do her post graduate studies at the University of Waikato in New Zealand in mid-2016. She completed her master's degree in Disability and Inclusion studies in early 2019. Prior to commencing studies, she worked as a primary school teacher, special education teacher and a teacher's college lecturer in her home country, Papua New Guinea. Her research explored the views and experiences of daily life for women living with visible, physical disabilities in rural Papua New Guinea. She is passionate about making a difference in the lives of those who are marginalized by disrupting their silence. Her research aims to give voice to women with disabilities through the voices of her research participants.

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